



ADVANCED PRACTICE REGISTERED NURSE FACT SHEET

Advanced Practice Registered Nurse (APRN)

An APRN is an individual licensed as an APRN by the Minnesota Board of Nursing and certified by a national nurse certification organization acceptable to the board to practice as a Certified Clinical Nurse Specialist (CNS), Certified Nurse Practitioner (CNP), Certified Nurse Midwife (CNM), or Certified Registered Nurse Anesthetist (CRNA). The APRN must be certified in one of the four APRN roles and one of the six population foci.

Population focus areas

- Family and individual across the lifespan
- Adult-Gerontology
- Neonatal
- Pediatrics
- Women's and gender-related health
- Psychiatric and mental health

Scope of APRN practice

The scope and standards of an APRN are defined by the national professional nursing organizations specific to the practice as a CNS, CNM, CNP, or CRNA in the specific population focus. The scope includes but is not limited to performing acts of advanced assessment, diagnosing, prescribing, and ordering. The practice includes functioning as a primary care provider, direct care provider, case manager, consultant, educators and researcher.

APRNs are accountable to patients for the quality of APRN care rendered, recognizing the limits of individual knowledge and experience, planning for the management for situations beyond the APRN's expertise. APRNs accept referrals, consult with, collaborate with and refer to other health care providers as warranted by the needs of the patient. APRNs may order, perform, supervise, and interpret diagnostic studies, excluding interpreting computed tomography scans, magnetic resonance imaging scans, positron emission tomography scans, nuclear scans, and mammography (Minn. Stat. § 148.171, sub 5(4), 10(2), 11(4), 13, 21(2)).

Prescribing

Licensed APRNs are authorized to prescribe, dispense and administer drugs, controlled substances (Schedule II through V) and therapeutic devices

Primary care provider

A licensed health care provider who acts as the first point of care for comprehensive health care maintenance and promotion, preventative care, and undiagnosed health care concerns, and who provides continuing care of varied health conditions (Minn. Stat. § 148.171, sub 17a).

Credentials to be used

Jane Doe APRN, CNS; Jane Doe APRN, CNP; Jane Doe APRN, CNM; Jane Doe APRN, CRNA. Educational degrees may be added.

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The content of this document is based on the following Minnesota Statutes:

Minn. Stat. § 148.171, sub 3, 4(a), 5, 10, 11, 13, 17(a), 21

Minn. Stat. § 148.211 subd 1(a), (b), (c)

Minn. Stat. § 148.233 subd 2 (b)

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Requirements for Licensure as an APRN

- Must hold a current Minnesota Registered Nurse (RN) license or eligibility for licensure
- Must not hold an encumbered RN license in another state or territory
- Must have completed a graduate level APRN program accredited by a nursing or nursing-related accrediting body that is recognized by the United States Secretary of Education or Council for Higher Education Accreditation as acceptable to the Board of Nursing. The education must be in one of the four roles and one of the six population foci appropriate to the education.
- Must have and maintain current certification by a national certifying body recognized by the board in the APRN role and one of the 6 population foci
- Must report any criminal convictions, nolo contendere plea, Alford plea, or other plea arrangement
- Must not have committed any acts or omissions which are grounds for disciplinary action in another jurisdiction that would be grounds for disciplinary action in section 148.261 or restitution has been met.

Acceptable certifying organizations

- American Academy of Nurse Practitioners (AANP)
- American Association of Critical-Care Nurses Certification Corporation (AACN)
- American Nurses Credentialing Center (ANCC)
- American Midwifery Certification Board (AMCB)
- National Board of Certification & Recertification for Nurse Anesthetists (NBCRNA)
- Pediatric Nursing Certification Board (PNCB)
- National Certification Corporation for the Obstetric, Gynecological, and Neonatal Nursing Specialties (NCC)

Grandfathering

A license will be issued for an APRN who does not meet the educational requirements but was certified and on the Board of Nursing APRN registry on July 1, 2014, and meets all other requirements.

Post-graduate practice for CNP and CNS only:

CNPs and CNSs listed on the APRN Registry after or beginning practice as an APRN after July 1, 2014 must practice for at least 2,080 hours within the context of a collaborative agreement setting in a hospital or integrated clinical setting where APRNs and physicians work together. Validation of practice is required. For the purposes of this section, a mutually agreed upon plan for the overall working relationship between a CNP or CNS and one or more Minnesota licensed physician or APRN that designates the scope of collaboration needed to manage the care of patients. The CNP, CNS and one of the collaborating physicians or APRNs must have experience in providing care to patients with the same or similar medical problems. APRNs that are licensed and are on the Minnesota APRN registry on or prior to July 1, 2014 will complete an affidavit confirming the completion of the required 2,080 hours.

CRNA practice

A CRNA may perform nonsurgical therapies for acute and chronic pain symptoms upon referral and in collaboration with a Minnesota licensed physician. For purposes of providing nonsurgical therapies for acute and chronic pain, the CRNA and the one or more physician must have a mutually agreed upon plan that designates the scope of collaboration needed for providing nonsurgical therapies to patients with acute and chronic pain. The CRNA must perform the nonsurgical therapies at the same licensed health care facility as the physician. When performing nonsurgical therapies for chronic pain a CRNA must have written prescribing agreement with a licensed physician that defines the delegated responsibilities related to prescribing drugs and therapeutic devices within the scope of the agreement and the practice of the CRNA (Minn. Stat. § 148.171 subd. 21 (b), (c)).

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